

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date:: 04/12/04  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: SYSTEM AND METHOD FOR PROVIDING AN  
INTERACTIVE DISPLAY  
Attorney Docket Number:: MFCP.110967  
Request for Early Publication?:: NO  
Request for Non-Publication?:: NO  
Suggested Drawing Figure::  
Total Drawing Sheets:: 8  
Small Entity?:: NO  
Latin name::  
Variety denomination name::  
Petition included?:: NO  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: NO

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Marieke  
Middle Name::  
Family Name:: Iwema  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: Washington  
Country of Residence:: US  
Street of mailing address:: 10300 Rainier Avenue S.  
  
City of mailing address:: Seattle  
State or Province of mailing address:: Washington  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98178

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Kelly  
Middle Name:: E.  
Family Name:: Rollin  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: Washington  
Country of Residence:: US  
Street of mailing address:: 1730 N. Northlake Way  
#117  
City of mailing address:: Seattle

State or Province of mailing address:: Washington

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98103

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Oliver

Middle Name:: C.

Family Name:: Lee

Name Suffix::

City of Residence:: Redmond

State or Province of Residence:: Washington

Country of Residence:: US

Street of mailing address:: 17440 NE 38<sup>th</sup> Street  
#A102

City of mailing address:: Redmond

State or Province of mailing address:: Washington

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98052

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Canada

Status:: Full Capacity

Given Name:: Stephen

Middle Name:: P.

Family Name:: Proteau

Name Suffix::

City of Residence:: Bothell

State or Province of Residence:: Washington

Country of Residence:: US  
Street of mailing address:: 15210 103<sup>rd</sup> Avenue NE  
  
City of mailing address:: Bothell  
State or Province of mailing address:: Washington  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98011-7232

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Colin  
Middle Name:: R.  
Family Name:: Anthony  
Name Suffix::  
City of Residence:: Kirkland  
State or Province of Residence:: Washington  
Country of Residence:: US  
Street of mailing address:: 11207 123<sup>rd</sup> Lane NE  
City of mailing address:: Kirkland  
State or Province of mailing address:: Washington  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98033

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Middle Name:: M.  
Family Name:: Girling

Name Suffix::

City of Residence:: Kirkland  
State or Province of Residence:: Washington  
Country of Residence:: US  
Street of mailing address:: 9647 Observation Drive  
  
City of mailing address:: Kirkland  
State or Province of mailing address:: Washington  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98033

### **Correspondence Information**

Correspondence Customer Number:: 05251

### **Representative Information**

Representative Customer Number:: 05251

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

## **Assignee Information**

Assignee name:: Microsoft Corporation  
Street of mailing address:: One Microsoft Way  
City of mailing address:: Redmond  
State or Province of mailing address:: Washington  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98052